

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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Detail by Officer/Registered Agent Name

Florida Non Profit Corporation

LAKES OF THE MEADOW MASTER MAINTENANCE ASSOCIATION, INC.

Filing Information

Document Number 759252
FEI/EIN Number 592165738
Date Filed 07/22/1981
State FL
Status ACTIVE
Last Event CORPORATE MERGER
Event Date Filed 01/22/1997
Event Effective Date NONE

Principal Address

4450 S.W. 152 AVENUE
MIAMI FL 33185 US

Changed 03/02/1999

Mailing Address

11981 SW 144 CT
SUITE #201
MIAMI FL 33186

Changed 06/22/2005

Registered Agent Name & Address

SKRLD, INC.
201 ALHAMBRA CIRCLE
SUITE 1102
CORAL GABLES FL 33134 US

Name Changed: 07/09/1991

Address Changed: 07/09/1991

Officer/Director Detail

Name & Address

Title V

WANDER, JEFFREY
4829 SW 154 AVENUE
MIAMI FL 33185

Title P

BRADDOCK, VIRGINIA

Examiner	Stamp	Disp.	Trade	Stamp Name
Stephen Kovach	10/19/2009 4:04:29 PM	A	ELEC	Approved
Carlos Labiste	12/8/2009 12:28:10 PM	A	STRU	Approved

5029 SW 151 PLACE
MIAMI FL 33185

Title S

RODRIGUEZ, EDUARDO
15343 SW 42 TERRACE
MIAMI FL

Title D

SIERRA, DAVID J
4266 SW 153 PL
MIAMI FL 33185

Title T

ALBUERNE, LUIS
14735 SW 54 TERRACE
MIAMI FL

Title D

BACHMANN, JORGE A
15323 SW 52 TERRACE
MIAMI FL 33185

Annual Reports

Report Year Filed Date

2007	02/19/2007
2008	04/21/2008
2009	03/10/2009

Document Images

03/10/2009 -- ANNUAL REPORT	View image in PDF format
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02/19/2007 -- ANNUAL REPORT	View image in PDF format
01/30/2006 -- ANNUAL REPORT	View image in PDF format
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01/27/1997 -- MERGER	View image in PDF format
04/08/1996 -- ANNUAL REPORT	View image in PDF format
05/01/1995 -- ANNUAL REPORT	View image in PDF format

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Carlos Labiste	12/8/2009 12:28:10 PM	A	STRU	Approved

MIAMI-DADE COUNTY BUILDING DEPARTMENT

ELECTRICAL FEE SHEET

*Attention applicant: you are responsible for filling out this application correctly. If you have any questions concerning what category your work falls under, please see an inspector or processor for your trade. Refunds will not be given in case of error on your part and you will be charged a double fee plus a \$100.00 for doing work without a permit. Minimum fee for electrical permits is \$51.50 unless otherwise noted.

I understand that perjury is a felony of the third degree.

(L.S.)

Category 01 General Electric

G080	Residential wiring (Please note the fee will be calculated based on the square footage on the master permit) (Includes all residential items under Category 01 except common areas of Group H occupancy and service change all groups)	0.08¢ per Sq. Ft. (Minimum Fee \$68.70)	# of Sq. Ft.		
G081	Residential wiring alteration or repair including all residential items under category 01 except common areas of Group H occupancy and service changes all groups)	0.046¢ per \$1.00 in Value (Minimum Fee \$68.70)	Est. Value		
G005	All other wiring/outlets (includes empty conduit system)	\$ 1.84 per Outlet	10 400 WATT LIGHT FIXTURES	X10	18.40
G008	AC/refrigeration system elec. work	\$ 6.87 per Ton	# of Tons		
G009	Fixture	\$ 1.84 per Fixture	# of Fixtures		
G010	Plugmold Track Lighting	\$ 3.56 per 5 Feet	# of Ln. Ft.		
G012	Generator/Transformer/Strip heater KW	\$ 8.02 per ea. 10 KW	# of KW		
G025	Single station residential smoke detector (does not include outlet)	\$ 1.37 per Detector	# of Detectors		
G033	Electrical Feeders	\$ 13.74 per Feeder	# of Feeders		
G034	Permanent Service to Buildings (Need master permit number)	\$ 5.16 per 100 Amps	# of Amps		
G067	Repair or upgrade of existing service (If commercial and no building permit must be processed)	\$ 5.16 per 100 Amps	# of Amps		
G082	Special outlets	\$ 8.02 per Outlet	# of Outlets		
G041	Commercial equipment	\$ 8.02 per 10 KW	# of KW		
G045	Electrical equipment (switchboard control board)	\$ 22.90 per Board	# of Boards		
G083	Motors install repair or replace	\$ 10.31 each Motor	# of Motors		
G076	Conduit ductbank	\$ 2.07 per Ln. ft.	# of Ln. ft.		
G075	Time Clock	\$ 8.02 per Time Clock	# of Time Clocks		
G077	Underground Manhole	\$114.49 per Manhole	# of Manholes		
G073	Screen bonding ground	\$ 68.70 per Installation	# of Installations		
G079	Safety check for reconnection	\$ 5.16 per 100 Amp	# of Amps		
G115	Fixture retrofit	\$ 51.50 per jobs	# of Jobs		
G122	Demolition	\$ 51.50 per structure	# of Structures		

Category 02 Burglar Security Systems

G089	Installation Wiring	\$ 51.53 per System	# of Jobs		
G090	Installation Devices	\$ 51.53 per System	# of Jobs		
G105	Complete System	\$103.05 per System	# of Systems		
G091	Repair to System	\$ 51.53 per System	# of Systems		
G104	Installation Wiring	\$ 51.53 per System	# of Jobs		
G103	Installation of Devices	\$ 51.53 per System	# of Jobs		
G106	Complete System	\$103.05 per System	# of Systems		
G107	Repair to System	\$ 51.53 per System	# of Systems		

Fee Code	Description	Fee Calculations	Units	# of Units	Fee
Category 04 Fire Alarm (needs processing)					
G087	New systems and upgrades	\$143.12 per system	# of Systems	_____	_____
G088	Repair and additions to existing system	\$ 68.70	# of Systems	_____	_____
Category 06 Master T.V. Antenna					
G020	Master T.V.	\$ 22.90 Control	# of Controls	_____	_____
G025	Devices	\$ 1.37 per Device	# of Devices	_____	_____
G069	Repair to existing system	\$ 1.37 per Device	# of Devices	_____	_____
G113	Cable T.V.	\$ 51.50 per System	# of Systems	_____	_____
G114	Satellite Dishes	\$ 51.50 per System	# of Systems	_____	_____
Category 06 and 35 Combination Master T.V. Antenna/Telephone Communicators					
G121	Antenna & Communication	\$ 51.50 per System	# of Systems	_____	_____
Category 07 Sound & Intercom					
G092	New System (Group I)	\$ 68.70 per System	# of Systems	_____	_____
G093	New System (Other Groups)	\$103.05 per System	# of Systems	_____	_____
G094	Repair System	\$ 68.70 per System	# of Systems	_____	_____
Category 08 Utility Electrical (needs processing)					
Note: for replacement of power supplies in County rightway easement					
G099	Electrical Service	\$103.05 per Service	# of Services	_____	_____
Category 14 Temporary Service for Construction (Must list master Bldg. permit #) (Must have separate application)					
G002	Temp for Construction	\$ 57.25 per Service	# of Services	_____	_____
G078	Temp service for asbestos removal	\$ 57.25 per Service	# of Services	_____	_____
Category 15 Temporary for Test (ELEVATORS) (Good for 180 days two affidavits required. One affidavit to be kept at job site, other delivered to inspector's office) (Must have separate application)					
G038	Temp for Test (elevator)	\$103.05 per Elevator	# of Elevators	_____	_____
Category 16 Specialty Wiring (includes circus, carnival, fair and Christmas tree lots) (Must be processed if no building permit.)					
G086	Per ride or structure with electrical wiring	\$ 57.25 per Ride or Structure	# of Rides or Structures	_____	_____
Category 18 Energy Service Management					
G095	Per Floor	\$120.22 per Floor	# of Floors	_____	_____
G096	Repair per Floor	\$ 68.70 per Floor	# of Floors	_____	_____
Category 21 Agricultural Services (Must be processed by Zoning prior to Electrical review)					
G035	Agricultural Service (permanent) Includes pump and related equipment	\$ 57.25 per Service	# of Services	_____	_____
Category 22 Trailer Service (Must be processed if no building category 86)					
G036	Trailer Service (construction)	\$137.39 per Service	# of Services	_____	_____
G037	Trailer Service (residential)	\$ 68.70 per Service	# of Services	_____	_____
G008	A/C System Electrical work	\$ 6.87 per ton	# of Tons	_____	_____
Category 23 Swimming Pools (Must be tied to building permit except for repairs of electrical only)					
G026	Pool or Spa (Residential)	\$ 68.70 per Pool or Spa	# of Pools or Spas	_____	_____
G027	Pool or Spa (Commercial)	\$160.29 per Pool or Spa	# of Pools or Spas	_____	_____
G056	Pool/Spa (Residential)	\$103.05 per Pool or Spa	# of Pools or Spas	_____	_____
G059	Pool or Spa (Commercial)	\$217.54 per Pool or Spa	# of Pools or Spas	_____	_____
G097	Repair Residential Pool	\$ 68.70 per Pool or Spa	# of Pools	_____	_____
G098	Repair Commercial Pool	\$160.29 per Pool or Spa	# of Pools	_____	_____
Category 24 Free Standing Service (new meter where no building permit must be processed) Includes parking lot lighting poles, lawn sprinkler pump, etc.					
G099	Free Standing Service	\$103.05 per Service	# of Services	_____	_____

Fee Code	Description	Fee Calculations	Units	# of Units	Fee
Category 26 Temp Service Test (good for 30 days) Two affidavits are required. One affidavit to be kept at job site, one to be delivered to inspector's office (Separate application)					
G031	Temp for Test (Commercial)	\$103.05 per Service	# of Services	_____	_____
Category 27 Interior Sign Architectural Feature (Must be processed) Inside structure only.					
G051	Linear Neon Strips	\$ 2.29 per 5 ft.	# of Sq. Ft.	_____	_____
G013	Sq. Ft. of Sign	\$ 1.13 per Sq. Ft. (Minimum Fee \$76.71)	# of Sq. Ft.	_____	_____
G014	Repairs, reconnection	\$ 67.55 each	\$ of Repairs	_____	_____
Category 28 Lighting Pole (Parking lot lighting from poles) (Must be processed on separate application if no building permit; this will result in building fees being assessed by the plans examiner.)					
G084	Light Pole Standard (Group I)	\$ 11.45 per Pole	# of Poles	<u>10</u>	<u>114.50</u>
G085	Light Pole Standard (Commercial)	\$ 17.18 per Pole	# of Poles	_____	_____
Category 29 Recreational Vehicle (temporary service for hurricane or emergency use only) (Must be processed by Zoning)					
G037	Trailer Service (Residential)	\$ 68.70 per Service	# of Services	_____	_____
Category 31 Change out of exact replacement of A/C. (This category is for Electrical Contractors and State Mechanical licensee's only)					
G043	Replace/relocate existing A/C Refrigeration Units by Tons	\$ 2.29 per Ton	# of Tons	_____	_____
G044	Replace/relocate existing A/C Refrigeration Units by KW	\$ 2.29 per KW	# of KW	_____	_____
Category 32 Data Communication Cables					
G110	Data Communication Cables	\$ 51.50 per System	# of Systems	_____	_____
Category 33 Central Vacuum					
G109	Central Vacuum	\$ 51.50 per System	# of Systems	_____	_____
Category 34 Solar Photovoltaic (Must be processed if no building permit)					
G111	Solar Photovoltaic	\$ 51.50 per System	# of Systems	_____	_____
Category 35 Telephone & Communication					
G108	Telephone & Communication	\$ 51.50 per System	# of Systems	_____	_____
Category 36 Smart House System (Must be processed if no building permit)					
G112	Smart House System	\$ 51.50 per System	# of Systems	_____	_____
Category 38 Generators (Standalone) (To be used when there is no building permit and must be processed)					
G012	Generator	\$ 8.02 per ea. 10KW	# of KW	_____	_____

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Stephen Kovach	10/19/2009 4:04:29 PM	A	ELEC	Approved
Carlos Labiste	12/8/2009 12:28:10 PM	A	STRU	Approved

DAVIS ENGINEERS

780 TAMiami CANAL ROAD - MIAMI, FLORIDA 33144
PHONE: 305-266-2566 FAX: 305-267-1556 E-mail: projects@davisengrs.com

O.L.#: 127365
E.B.#: 0001809

PROJECT:

Lakes Of The Meadow

4450 SW 152 Avenue

Miami, FL 33185

Folio # 592165738

CLIENT:

R.L.S. Lighting, Inc.

DE No.:

2K9RL09

Structural Calculations

Description:

Foundation Design For Light Pole

DATE:

September 21, 2009

Miami Dade County Building Department - Job Copy

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GENERAL NOTES

No. of Pages:

Cover + 3

Examiner

Date Time Stamp

Disp. Trade Stamp Name

Stephen Kovach 10/19/2009 4:04:29 PM A ELEC Approved

Carlos Labiste 12/8/2009 12:28:10 PM A STRU Approved

Harold R. Cobb, P.E.
Structural Engineer
FL. No.: 10993

Light Pole Foundation Design:

Project: Lakes of the Meadow
Job No.: 2K9RL09

1 -Post Geometry:

h Post Height 1 ft
dtop Post Diam (Top.) in
dbot Post Diam (Bot.) in
D Avg. Post Diameter 7.32 in
D' Depth of protruding elem in
D'/D Roughness Ratio 0

tw Post Thickness in
Arm Radius (in) in
Arm Diam (Top) in
Arm Diam (Bot.) in

Lamp Length in
Lamp Height in
Lamp Width (1) in
Lamp Type

Base Diam. 0 in
Base Height: 0 ft
habove Above Ground 0 ft
Below Ground 0 ft

Lamp Projected Area:

Side = 264 in ^2
Front = 176 in^2
Total = 1.83 ft^2

<--- Neglect if Base Height is 0 ft.

Materials:

Post
Post Fy 55,000 psi
Fb 36,300 psi
fc 3,000 psi
Conc Base: Fy 60,000 psi
fc 3,000 psi
Soil qa (sand) 2,500 psf
qa (rock) 2,500 psf

Single RLS-DA-400MH-IV

Harold R. Cobb, P.E.
Structural Engineer
PE#: 10993

2- Wind Load Calculation Data:

V Basic wind speed: mph
Exposure category:
Building Category: I
I Importance Factor
Hurricane prone Region:
Kd Directionality Factor
Kzt Topographic Factor

Lakes of the Meadows, Miami-Dade County, FL
ASCE-7/02 Velocity pressure coeff.
alpha = 9.5
zg = 900 ft
G = 0.85

	Mark	Elev (ft)	Diam (in)	Area (ft^2)	Kz --	q(z) (psf)	h/D --	Cf --	F (lb)	Mot (lb-ft)
12	h Lamp	25.00	11.0	1.83	0.95	39.8	51.1	2.00	124.13	3,103
11	h Arm	24.50	4.0	0.52	0.94	39.7	51.1	1.20	21.18	519
10	h_pole_10	24.00	5.6	1.16	0.94	39.5	51.1	0.70	27.29	655
9	h_pole_9	21.60	6.0	1.23	0.92	38.6	48.2	0.70	28.24	610
8	h_pole_8	19.20	6.3	1.30	0.89	37.7	45.6	0.70	29.05	558
7	h_pole_7	16.80	6.6	1.36	0.87	36.6	43.3	0.70	29.71	499
6	h_pole_6	14.40	7.0	1.43	0.85	35.8	41.2	0.70	30.44	438
5	h_pole_5	12.00	7.3	1.50	0.85	35.8	39.3	0.70	31.87	382
4	h_pole_4	9.60	7.7	1.56	0.85	35.8	37.6	0.70	33.30	320
3	h_pole_3	7.20	8.0	1.63	0.85	35.8	36.0	0.70	34.73	250
2	h_pole_2	4.80	8.3	1.70	0.85	35.8	34.6	0.70	36.16	174
1	h_pole_1	2.40	8.7	1.77	0.85	35.8	33.2	0.70	37.59	90
0	h_base	0.00	9.0							
	Base h_Ground	0.00								
Total									464	7598

Davis Engineers

Miami Florida, 33144

PH: 305-266-2566 FX: 305-267-1556

20090916 - Single Fixture Light Pole Calcs..xls

Single RLS-DA-400MH-IV

9/21/2009 / 10:15 AM

3 - Post Design CheckProject: Lakes of the MeadowJob No. : 2K9RL09Sx at Post Base = 7.33412 in³

Round Pole at Base

Allowable Stress Increase =

fb = Moment at Base / (Sx at Post Base)

12,432.5 psi

Steel (55 ksi)

Fb = Allowable Bending Stress x I

36,300.0 psi

OK**4 - Foundation Design Check**

Lamp height (ft) = 25.00 ft

P = Equivalent Lateral Load = 304 lbs = (Moment at Base / Lamp Height)

b = diameter of concrete base

d = depth of embedment

(Eq-1) $d = (A/2) (1 + (1+(4.36h/A))^{0.5})$ (Eq-2) $A = (2.34 P) / (S1 \times b)$

(Eq-3) So = 100 psf for Clay, Sandy Clay, Silty Clay.

S1 = So x d / 3

Soil Type:

Sand

Diam b (ft)	Depth d (ft)	S1	A	Eq-1 (ft)	CHK = Diam - D from Eq-1) (OK if > 0)
2.0		383	0.928	5.51	0.24
2.5	5.50	367	0.776	5.00	0.50
3.0	5.25	350	0.677	4.65	0.60
3.5	5.00	333	0.610	4.39	0.61
4.0	4.75	317	0.561	4.20	0.55
4.5	4.50	300	0.527	4.06	0.44
5.0	4.25	283	0.502	3.96	0.29

Harold R. Cobb
21 Sept 2009

Harold R. Cobb, P.E.
Structural Engineer
PE#: 10993

Notes:

- 1) Wind Pressures as per ASCE-7/02.
- 2) Lamp Width only required when 3 or more lamps are used. Disregard Otherwise
- 3) Foundation design reference: Timber Construction Manual Eq-5.96
- 4) Integrity of Lamp assembly by Lamp manufacturer.

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EB No.: 0001809

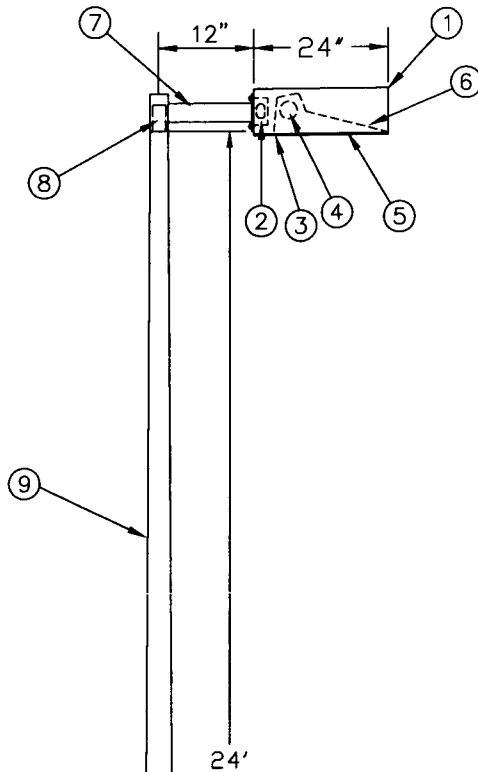
O.L. No.: 127365

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Page 2 of 2

STRUCTURAL SUPPORT FOR SINGLE RLS-DA-400MH-IV LUMINAIRE

EACH LUMINAIRE: 1.42 EPA/34 LBS.
90° SINGLE BRACKET: .33 EPA/9 LBS.
TOTAL EPA: 1.75/ TOTAL WEIGHT: 43 LBS.



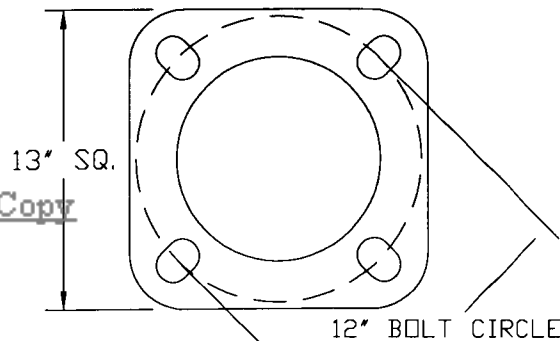
SPECIFICATIONS

1. EXTRUDED ALUMINUM HOUSING (24" x 16" x 11").
2. 400 H.P.F. CWA BALLAST W/CAPACITOR ATTACHED TO HOUSING.
3. EXTRUDED ALUMINUM DOOR FRAME.
4. 400 WATT METAL HALIDE LAMP.
5. CLEAR-TEMPERED, IMPACT RESISTANT GLASS.
6. DIE-FORMED SPECULAR ALUMINUM REFLECTOR.
7. 50 K.S.I. DAVIT ARM.
8. TENON, SLIP-FIT MOUNT (3-1/2" x 6").
9. 24' ROUND TAPERED STEEL POLE (55 K.S.I./1196"/11 GA.). (5.64" TOP O.D./9.0" BOTTOM O.D.).
10. CONDUIT, SUPPLIED BY OTHERS.
- 11a. CONCRETE FOUNDATIONS, BASED ON LOCAL CODES AND SOIL CONDITIONS 2'-0" x 5'-9" W/ 7 #7 VERT. & 5 #3 TIES @ 10" O.C. MAX., $f'_c = 3,000$ PSI)
- 11b. IF PRECAST FOUNDATIONS ARE USED, PLEASE REFER TO COMPACTION NOTE.
- PLEASE NOTE: LIFT POINTS BY FABRICATORS.
12. ELECTRICAL ACCESS HANDHOLE W/ WP COVER AS PER (N.E.C. 410-15).
13. BASE PLATE (SEE DETAIL).
14. ANCHOR BOLTS (4 REQUIRED 1" ϕ Nom. x 36" x 4").
15. GROUND ROD 5/8" x 10' COPPER CLAD

NOTES

1. LUMINAIRE, POLE AND HARDWARE ARE DESIGNED TO WITHSTAND WINDLOADS AS PER FLORIDA BUILDING CODE 2007 /ASCE7-02.
2. FUSE EACH POLE AT ELECTRICAL HANDHOLE WITH BUSSMAN INLINE FUSE HOLDER OR EQUAL

BASEPLATE



ANCHOR BASE

P:\Projects\2K9RLD9-SR-PL219_Lake of the Meadows.dwg, 9/21/2009 11:16:57 AM
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Stephen Kovach 12/15/2009 4:04:29 PM ELEC Approved
Carlos Labiste 12/8/2009 12:38:10 PM A STRU Approved



Building
Herbert S. Saffir Permitting and Inspection Center
11805 SW 26th Street
Miami, Florida 33175-2474
786-315-2100

miamidade.gov

451346

REQUESTED REVIEWS

- | | | | | | |
|---|---|---|--|-------------------------------|-------------------------------|
| <input type="checkbox"/> ALL | <input type="checkbox"/> BLDG | <input type="checkbox"/> DERM | <input type="checkbox"/> ELEC | <input type="checkbox"/> ENRG | <input type="checkbox"/> FIRE |
| <input type="checkbox"/> HCAP | <input type="checkbox"/> LANDSCAPING | <input type="checkbox"/> MECH | <input type="checkbox"/> PLUM | <input type="checkbox"/> PWKS | <input type="checkbox"/> PWCC |
| <input type="checkbox"/> ROOF | <input type="checkbox"/> SIGN | <input checked="" type="checkbox"/> STRU | <input checked="" type="checkbox"/> ZNPR | | |
| <input type="checkbox"/> PERMIT BY AFFIDAVIT CHECK | <input type="checkbox"/> SHORT TERM EVENT AFFIDAVIT CHECK | <input type="checkbox"/> OPTIONAL PLAN REVIEW | | | |
| <input type="checkbox"/> BLDG <input type="checkbox"/> ELEC <input type="checkbox"/> MECH <input type="checkbox"/> PLUM <input type="checkbox"/> STRU | | | | | |

Dear Applicant:

Please complete the following information for notification on the status of your plans.

Applicant's First Name: (PRINT CLEARLY) Monica Last Name: (PRINT CLEARLY) Sotiriades
Cellular Number: 954-966-5215 Office/Home Number: _____

EMAIL Address: _____

Comments:

Stru / ZNPR Rework.

NOTE: IF AN EMAIL ADDRESS WAS PROVIDED YOU WILL BE NOTIFIED VIA EMAIL AND/OR AUTOMATIC TELEPHONE CALL CONCERNING THE STATUS OF YOUR PLANS

-FOR OFFICE USE ONLY-

TO BE COMPLETED BY BUILDING AND OCCUPANCY REPRESENTATIVE OR PLANS PROCESSING TECHNICIAN:

Application Date: 11/25/09 Clerk Name: Luis Arrival Time: 11:29
Process No(s): 09010005298

- | | | | |
|---|-------------------------------------|--|---------------------------------------|
| <input checked="" type="checkbox"/> Walk-Thru | <input type="checkbox"/> Drop-Off | <input checked="" type="checkbox"/> Rework | <input type="checkbox"/> Re-Issue |
| <input checked="" type="checkbox"/> Residential | <input type="checkbox"/> Commercial | <input type="checkbox"/> Plan Revision | <input type="checkbox"/> Shop Drawing |

TO BE COMPLETED BY PLANS PROCESSING TECHNICIANS:

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GENERAL01-11302009.pdf

BLDG <input type="checkbox"/> A <input type="checkbox"/> D <input type="checkbox"/> N	HCAP <input type="checkbox"/> A <input type="checkbox"/> D <input type="checkbox"/> N	ROOF <input type="checkbox"/> A <input type="checkbox"/> D <input type="checkbox"/> N
DERM <input type="checkbox"/> A <input type="checkbox"/> D <input type="checkbox"/> N	LAND <input type="checkbox"/> A <input type="checkbox"/> D <input type="checkbox"/> N	SIGN <input type="checkbox"/> A <input type="checkbox"/> D <input type="checkbox"/> N
ELEC <input type="checkbox"/> A <input type="checkbox"/> D <input type="checkbox"/> N	MECH <input type="checkbox"/> A <input type="checkbox"/> D <input type="checkbox"/> N	STRU <input type="checkbox"/> A <input type="checkbox"/> D <input type="checkbox"/> N
ENRG <input type="checkbox"/> A <input type="checkbox"/> D <input type="checkbox"/> N	PLUM <input type="checkbox"/> A <input type="checkbox"/> D <input type="checkbox"/> N	ZNPR <input type="checkbox"/> A <input type="checkbox"/> D <input type="checkbox"/> N

Customer Notified By: _____ Date: ____/____/____ Time: ____:____

MIAMI-DADE COUNTY**BUILDING DEPARTMENT**<http://www.miamidade.gov/building/home.asp>

12/9/2009 10:16:57 AM

Tracking #	Process #	Permit #
0000451346	C2010005298	2010010433

THIS COPY OF PLANS MUST BE AVAILABLE ON BUILDING SITE OR AN INSPECTION WILL NOT BE MADE.

Review	Disposition	Reviewer	Date
ELEC	A	Stephen Kovach	10/19/2009 4:05:38 PM
STRU	A	Carlos Labiste	12/8/2009 12:28:24 PM
ZONE	A	Charmaine Shinhoster	12/9/2009 9:52:31 AM
BLDG	A	Lisette Landa	10/19/2009 1:43:23 PM

Disclaimer.

Subject to compliance with all Federal, State, and County Laws, rules and regulations. Miami-Dade County assumes no responsibility for accuracy of or results of these plans.

NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to the property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies or federal agencies.

Stamp Name	Trade	Disposition	Stamp Description
Approved	ZONE	A	Approved
Approved	STRU	A	Approved ***** Job copy MUST be PRINTED TO FULL SCALE *****
Approved	ELEC	A	Approved
Disapproved	ZONE	D	Disapproved

PERMIT APPLICATION

C2010005298

IF SUBSIDIARY PROVIDE MASTER PERMIT NUMBER HERE			
LOCATION OF IMPROVEMENTS	Job Address <u>4450 S.W. 152 AVE.</u> Folio <u>30-4921-003-1730</u> Lot _____ Block _____ Subdivision _____ PBpg _____ Metes and bounds _____		CONTRACTOR INFORMATION
TYPE OF IMPROVEMENTS	<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> New Construction on Vacant Land <input type="checkbox"/> Alteration Interior <input type="checkbox"/> Alteration Exterior <input type="checkbox"/> Relocation of Structure <input type="checkbox"/> Short Term Event <input type="checkbox"/> New Roof <input type="checkbox"/> Recovery (Roof) <input type="checkbox"/> Permit by Affidavit </div> <div style="width: 48%;"> <input type="checkbox"/> Enclosure <input type="checkbox"/> Repair <input type="checkbox"/> Repair Due to Fire <input type="checkbox"/> Demolish <input type="checkbox"/> Shell Only <input type="checkbox"/> Addition Attached <input type="checkbox"/> Addition Detached <input type="checkbox"/> Re-Roof <input type="checkbox"/> Foundation Only </div> </div> <p style="margin-top: 10px; text-align: center;">POLES + FIXTURES, REMOVE EXISTING</p>		Contractor No. <u>000017022</u> Last four (4) digits of Qualifier No. <u>7216</u> Contractor Name <u>BAILEY ELECTRIC</u> Qualifier Name <u>ROBERT SCATTOR</u> Address <u>3521 S.W. 35TH ST.</u> City <u>WEST PARK</u> State <u>FL</u> Zip <u>33023</u> Current use of property <u>RESIDENTIAL REC. CENTER</u> Description of Work <u>INSTALL NEW LIGHT</u> Sq. Ft. _____ Units _____ Floors _____ Value of Work <u>\$ 54,000.00</u>
PERMIT TYPE	<input type="checkbox"/> Building* Category _____ <input checked="" type="checkbox"/> Electrical <u>28</u> <input type="checkbox"/> Mechanical _____ <input type="checkbox"/> Plumbing _____ <input type="checkbox"/> LPGX _____	CHANGE TO AN EXISTING PERMIT	<input type="checkbox"/> Chg. Contractor <input type="checkbox"/> Re-Issue <input type="checkbox"/> Extension <input type="checkbox"/> Supplement <input type="checkbox"/> Reinspection
PERSON TO PICK UP PLANS	Name <u>Monica Sotiriades</u> Address <u>3251 SW. 35th St.</u> City <u>Hlywd</u> State <u>FL</u> Zip <u>33023</u> Phone <u>954 981-6770</u>		OWNER'S NAME
BONDING	Name _____ Address _____ City _____ State _____ Zip _____ Phone _____		ARCHITECT ENGINEER
BONDING	Name _____ Address _____ City _____ State _____ Zip _____ Phone _____		MORTGAGE LENDER

*See reverse side for Building Category

Application is hereby made to obtain a permit to do work and installation as indicated. I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that separate permits are required for **ELECTRICAL, PLUMBING, SIGNS, POOLS, MECHANICAL, WINDOW, SHUTTERS and ROOFING WORK** and there may be additional permits required for other governmental entities.

OWNER'S/PERMIT APPLICANT AFFIDAVIT: I certify that all of the foregoing information is accurate and that I have no unpaid civil penalties, administrative hearing cost investigative, enforcement, testing or monitoring costs or unpaid liens which are owed to Miami-Dade County.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR ATTORNEY OR LENDER BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

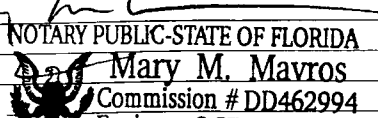
Signature of Owner or Owner's Agent Virginia M. Braddock
 PRINT NAME Virginia M. Braddock, Pres.
 STATE OF FLORIDA COUNTY OF MIAMI-DADE

Sworn to and subscribed before me this 1ST day of October, 2009

by Dona M. Enos
 (SEAL) 
 Personally known ☒
 or Produced Identification _____

Signature of Qualifier Robert Scattor
 PRINT NAME Robert Scattor
 STATE OF FLORIDA COUNTY OF MIAMI-DADE

Sworn to and subscribed before me this 28 day of Sept, 2009

by Mary M. Mavros
 (SEAL) 
 Personally known _____
 or Produced Identification _____

T-180). FOLLOW SOIL LAB RECOMMENDATION FOR THE

Manana Dade County Building Department - Job Copy

0000451346 - 12/9/2009 10:16:57 AM

SENT 01 10162009.pdf

Examiner	Date Time Stamp	Disp.	Trade	Stamp Name
Stephen Kovach	10/19/2009 4:04:56 PM	A	BBCC	Approved
Charmaine Shinhoster	12/9/2009 9:52:10 AM	A	ZONE	Approved

